## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000017335

Entity Name: IC2 DESIGNS, LLC

FILED Jan 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

227 GOLF CLUB DR. 2500 STAPLES AVENUE KEY WEST, FL 33040 US KEY WEST, FL 33040 US

Current Mailing Address: New Mailing Address:

227 GOLF CLUB DR.

KEY WEST, FL 33040 US

2500 STAPLES AVENUE

KEY WEST, FL 33040 US

FEI Number: 26-1979253 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROBERTS, HEATHER A
30471 COCONUT HIGHWAY
BIG PINE KEY, FL 33043 US
ROBERTS, HEATHER A
2500 STAPLES AVENUE
KEY WEST, FL 33040 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 01/05/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 ROBERTS, JASON N
 Name:
 ROBERTS, JASON N

 Address:
 30471 COCONUT HIGHWAY
 Address:
 2500 STAPLES AVENUE

 City-St-Zip:
 BIG PINE KEY, FL 33043 US
 City-St-Zip:
 KEY WEST, FL 33040 US

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 REISER, ANDREW C
 Name:

 Address:
 748 EROW AVENUE
 Address:

 City-St-Zip:
 MORGANTOWN, WV 26505 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JASON N ROBERTS MGMR 01/05/2009